



APPLICATION FOR PERMIT  
TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

RECEIVED

☐ SURFACE WATER

☐ GROUND WATER

0013 1986 4:30

\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION  
(GRAY BOXES FOR OFFICE USE ONLY)

DEPARTMENT OF ECOLOGY  
SPOKANE REGIONAL OFFICE

APPLICATION NO. <b>G328293</b>	W.R.I.A. <b>33</b>	COUNTY <b>11 FRANKLIN</b>	PRIORITY DATE <b>10-3-86</b>	TIME <b>4:56pm</b>	ACCEPTED <b>CAC</b>
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APPLICANT'S NAME — PLEASE PRINT

**(STEVE WEST)**

Bus. Tel. **545-9094**  
Home Tel. **547-4130**  
Other Tel. **547-8412**

ADDRESS (STREET)

**612 Road 47**

(CITY)

**PASCO**

(STATE)

**Wash.**

**99301**

(ZIP CODE)

DATE & PLACE OF INCORPORATION IF APPLICANT IS A CORPORATION

1. SOURCE OF SUPPLY

IF SURFACE WATER

IF GROUND WATER

SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNAMED, SO STATE)

SOURCE (WELL, TUNNEL, INFILTRATION TRENCH, ETC.)

TRIBUTARY

SIZE AND DEPTH

**15 X 142'**

2. USE

USE TO WHICH WATER IS TO BE APPLIED (DOMESTIC SUPPLY, IRRIGATION, MINING, MANUFACTURING, ETC.)

**IRRIGATION**

ENTER QUANTITY OF WATER  
REQUESTED USING UNITS OF:

CUBIC FEET PER SECOND (CFS)

OR

GALLONS PER MINUTE (GPM)

**1400**

ACRE FEET PER YEAR

**(SEASONAL IRRIGATION OF 140 ACRES)**

TIMES DURING YEAR WATER WILL BE REQUIRED

**IRR. SEASON**

IF IRRIGATION, NUMBER OF ACRES

**140**

IF DOMESTIC USE, NUMBER OF  
UNITS BY TYPE, E.G. 1-HOME,  
1-MOBILE HOME, 2-CAMPSITES, ETC.

IF MUNICIPAL USE, ESTIMATED  
POPULATION  
20 YEARS FROM TODAY

DATE PROJECT WAS OR WILL BE STARTED

DATE PROJECT WAS OR WILL BE COMPLETED

3. LOCATION OF POINT OF DIVERSION/WITHDRAWAL

3A. IF IN PLATTED PROPERTY

LOT	BLOCK	OF (GIVE NAME OF PLAT OR ADDITION)	SECTION	TOWN	RANGE	ALSO, PLEASE ENCLOSE A COPY OF THE PLAT AND MARK THE POINT(S) OF WITHDRAWAL OR DIVERSION
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3B. IF NOT IN PLATTED PROPERTY

ON ACCOMPANYING SECTION MAPS, ACCURATELY MARK AND IDENTIFY EACH POINT OF DIVERSION. SHOW  
NORTH-SOUTH AND EAST-WEST DISTANCES FROM NEAREST SECTION CORNER OR PROPERTY CORNER.

ALSO, ENTER BELOW THE DISTANCES FROM THE NEAREST SECTION OR PROPERTY CORNER TO THE DIVERSION OR WITHDRAWAL.

**1300' N. 1300' W. FROM S.E. CORNER SEC. 24**

LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION)

**(N.W 1/4 S.E. 1/4 S.E. 1/4)**

SECTION

**24**

TOWNSHIP N.

**11**

RANGE (E. OR W.) W.M.

**30 E.**

COUNTY

**Franklin**

4. DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LOCATED. IF NOT, INSERT NAME & ADDRESS OF OWNER

**No. (Con. Gen. Life)**

5. LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED

ATTACH A COPY OF THE LEGAL DESCRIPTION OF THE PROPERTY (ON WHICH THE WATER WILL BE USED) TAKEN FROM  
A REAL ESTATE CONTRACT, PROPERTY DEED OR TITLE INSURANCE POLICY. OR, COPY CAREFULLY IN THE SPACE BELOW.

**S.W 1/4 of SEC. 24 TOWN 11 N. R 30 E.**

I have examined this application  
as required by SEPA and find that  
it is: ☐ not an "action".

☒ categorically exempt.

**4-30-87**  
DATE

**Cindy A. Christian**  
SIGNATURE

APPLICATION

**Columbia Basin - R.O.W.**



WHAT IS YOUR INTEREST IN THE PROPERTY ON WHICH WATER IS TO BE USED (PROPERTY OWNER, LESSEE, CONTRACTOR, PURCHASER, ETC.)

Property OWNER

ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (INCLUDING WATER PROVIDED BY IRRIGATION DISTRICTS OR DITCH COMPANIES.)

YES

NO

IF YES, FROM WHAT SOURCE (i.e. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY

6. DESCRIPTION OF SYSTEM PROPOSED OR INSTALLED

(FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER OF SPRINKLERS, ETC.)

1290' center P. low P.

REMARKS

7.

IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH WILL BE 10 FEET OR MORE AT THE DEEPEST POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THESE FORMS CAN BE SECURED, TOGETHER WITH INSTRUCTIONS, FROM THE DEPARTMENT OF ECOLOGY.

SIGNATURES

STEVE WEST

LEGAL LANDOWNERS NAME  
(PLEASE PRINT)

Steve West

APPLICANT'S SIGNATURE

612 Bond 47 Pasco, Wash.

LEGAL LANDOWNER'S SIGNATURE (OWNER OF PROPERTY DESCRIBED IN ITEM NUMBER 5)

LEGAL LANDOWNER'S ADDRESS

FOR OFFICE USE ONLY

STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

SS.

This is to certify that I have examined this application together with the accompanying maps and data, and am returning it for correction or completion as follows:

In order to retain its priority date, this application must be returned to the Department of Ecology, with corrections, on or before, 19.....

Witness my hand this.....day of....., 19.....